ST. MARY'S HOME FOR THE AGED

2005 DIVISION STREET

MANITOWOC 54220 Phone: (920) 684-7171	L	Ownership:	Nonprofit Church/Corporation
Operated from 1/1 To 12/31 Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	Yes
Number of Beds Set Up and Staffed (12/31/05):	191	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/05):	191	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/05:	173	Average Daily Census:	176

Age, Gender, and Primary Diagnosis of	of Residents (12/	31/05)		Length of Stay (12/31/05)	용
Primary Diagnosis	%	Age Groups 	%	 Less Than 1 Year 1 - 4 Years	33.5
Developmental Disabilities	0.0	Under 65	3.5	More Than 4 Years	32.9
Mental Illness (Org./Psy)	45.7	65 - 74	5.8		
Mental Illness (Other)	3.5	75 - 84	32.4		100.0
Alcohol & Other Drug Abuse	0.0	85 - 94	45.1		
Para-, Quadra-, Hemiplegic	0.0	95 & Over	13.3	Full-Time Equivalent	
Cancer	1.2	İ		Nursing Staff per 100 Resid	ents
Fractures	0.0	İ	100.0	(12/31/05)	
Cardiovascular	13.3	65 & Over	96.5		
Cerebrovascular	5.8			RNs	7.0
Diabetes	1.2	Gender	%	LPNs	7.5
Respiratory	2.3			Nursing Assistants,	
Other Medical Conditions	27.2	Male	28.3	Aides, & Orderlies	46.1
		Female	71.7		
	100.0				
			100.0		

Method of Reimbursement

		Medicare 'itle 18			edicaid itle 19			Other			Private Pay	2		amily Care			anaged Care	l		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	14	100.0	336	4	3.6	143	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	18	10.4
Skilled Care	0	0.0	0	103	92.0	123	0	0.0	0	47	100.0	170	0	0.0	0	0	0.0	0	150	86.7
Intermediate				5	4.5	103	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	5	2.9
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependen	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	14	100.0		112	100.0		0	0.0		47	100.0		0	0.0		0	0.0		173	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution	or Residents	Condit	services, an	d Activities as of 12/	31/05
beachs builing Reporting Terror					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	15.6	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	1.2		51.4	47.4	173
Other Nursing Homes	1.9	Dressing	9.8		78.6	11.6	173
Acute Care Hospitals	78.8	Transferring	27.2		53.2	19.7	173
Psych. HospMR/DD Facilities	0.0	Toilet Use	22.0		56.6	21.4	173
Rehabilitation Hospitals	0.0	Eating	56.6		31.8	11.6	173
Other Locations	0.0	********	******	*****	******	******	*****
Total Number of Admissions	160	Continence		용	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	7.5	Receiving Resp	iratory Care	8.7
Private Home/No Home Health	21.6	Occ/Freq. Incontiner	nt of Bladder	58.4	Receiving Trac	heostomy Care	0.6
Private Home/With Home Health	14.0	Occ/Freq. Incontiner	nt of Bowel	35.3	Receiving Suct	ioning	1.2
Other Nursing Homes	2.3	İ			Receiving Osto	my Care	0.6
Acute Care Hospitals	18.1	Mobility			Receiving Tube	Feeding	1.7
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	3.5	Receiving Mech	anically Altered Diets	30.6
Rehabilitation Hospitals	0.0	<u> </u>					
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	32.7	With Pressure Sores		6.9	Have Advance D	irectives	92.5
Total Number of Discharges		With Rashes		6.9	Medications		
(Including Deaths)	171	İ			Receiving Psyc	hoactive Drugs	54.9

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

************	******	*****	*****	*****	*****	*****	*****	*****	*****
		Owne	ership:	Bed	Size:	Lic	ensure:		
	This	Non	profit	100	-199	Ski	lled	Al	1
	Facility	Peer Group		Peer Group		Peer Group		Faci	lities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	92.1	94.2	0.98	88.8	1.04	88.3	1.04	88.1	1.05
Current Residents from In-County	89.0	76.6	1.16	81.0	1.10	70.5	1.26	77.6	1.15
Admissions from In-County, Still Residing	33.8	23.1	1.46	23.7	1.42	20.5	1.65	18.1	1.86
Admissions/Average Daily Census	90.9	116.9	0.78	124.7	0.73	123.5	0.74	162.3	0.56
Discharges/Average Daily Census	97.2	121.8	0.80	127.4	0.76	126.7	0.77	165.1	0.59
Discharges To Private Residence/Average Daily Census	34.7	52.4	0.66	53.4	0.65	50.1	0.69	74.8	0.46
Residents Receiving Skilled Care	97.1	98.1	0.99	96.8	1.00	94.1	1.03	92.1	1.05
Residents Aged 65 and Older	96.5	97.5	0.99	92.1	1.05	92.5	1.04	88.4	1.09
Title 19 (Medicaid) Funded Residents	64.7	66.4	0.97	68.7	0.94	70.2	0.92	65.3	0.99
Private Pay Funded Residents	27.2	23.7	1.15	18.5	1.47	19.0	1.43	20.2	1.35
Developmentally Disabled Residents	0.0	0.3	0.00	0.4	0.00	0.5	0.00	5.0	0.00
Mentally Ill Residents	49.1	37.4	1.31	38.6	1.27	37.2	1.32	32.9	1.49
General Medical Service Residents	27.2	22.9	1.18	24.6	1.11	23.8	1.14	22.8	1.19
Impaired ADL (Mean)	49.6	49.9	0.99	48.5	1.02	47.2	1.05	49.2	1.01
Psychological Problems	54.9	57.1	0.96	57.4	0.96	58.9	0.93	58.5	0.94
Nursing Care Required (Mean)	7.2	6.4	1.11	7.1	1.00	7.1	1.00	7.4	0.96